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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) -All Filers Are Required to Complete This Page

1. Registrant Name PRESTON GATES ELLIS & ROUVELAS MEEDS LLP			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1735 NEW YORK AVE, NW SUITE 500 City WASHINGTON State/Zip (or Country) DC 20006			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name TERRI PAULK	Telephone 202 628 1700	E-mail (optional) TERRIP@PRESTONGATES.COM	5. Senate ID # 32098-951
7. Client Name <input type="checkbox"/> Self NATIONAL COUNCIL ON COMPENSATION INSURANCE			6. House ID # 31355090

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) **OR** Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report >> Termination Date _____ 11. No Lobbying Activities

INCOME OR EXPENSES - Complete Either Line 12 **OR** Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> >> \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$20,000)
Provide a good faith estimate, rounded to the nearest \$20,000 of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).	14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6013 of the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature _____ Date 02/14/2003

Printed Name and Title SUSAN GEIGER - ATTORNEY

Registrant Name: PRESTON GATES ELLIS & ROUVELAS MEEDS LLP

Client Name: NATIONAL COUNCIL ON COMPENSATION INSURANCE

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific Lobbying issues
Medical privacy regulations.

17. House(s) of Congress and Federal agencies contacted Check if None
Department of Health & Human Services

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
GEIGER, SUSAN	
SEE, CHAD	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature Susan Geiger Date 02/14/2003

Printed Name and Title SUSAN GEIGER - ATTORNEY